

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Grimbergen et al.	Group Art Unit: 1763
Serial No: 09/667,362	Examiner: Jeffrie Robert Lund
Confirmation No. 9755	
Filed: 9/21/2000	Attorney Docket No. 002813 USAP01/ETCH/SILICON/JB
For: REDUCING DEPOSITION OF PROCESS RESIDUE ON A WINDOW OF A CHAMBER	January 17, 2003 San Francisco, California

RESPONSE TO RESTRICTION REQUIREMENT

Box Non-Fee Amendment
Assistant Commissioner for Patents
Washington, D.C. 20231

Examiner Lund:

This communication is filed in response to the Restriction Requirement
mailed on December 17, 2002, and is being timely filed within 1 month thereof.

#10
1/29/03
MW

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Box Non-Fee Amendment
Assistant Commissioner for Patents
Washington, D.C. 20231

By


Stephen Guzzi

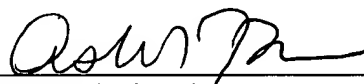
Date

1/17/03

Applicant provisionally elects the claims corresponding to Group I, namely claims 1-15, 18-23, 30-36, and 51-64 drawn to an apparatus, as defined by the Examiner.

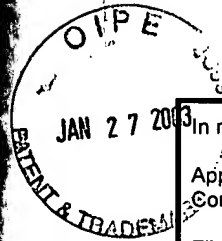
Respectfully submitted,
Janah & Associates, P.C.

Date: 1/17/03

By: 
Ashok K. Janah
Reg. No. 37,487

Please direct all telephone calls to: Ashok K. Janah, (415) 538-1555

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APPLIED MATERIALS, INC.
P.O. Box 450A
Santa Clara, California 95052



In re application of: Grimbergen, et al. Application Serial No: 09/667,362 Confirmation No: 9755 Filed: 9/21/2000 For: REDUCING DEPOSITION OF PROCESS RESIDUE ON A WINDOW OF A CHAMBER		Group No: 1763 Examiner: Jeffrie Robert Lund Attorney Docket No: 2813 USAP01/ETCH/SILICON/JB January 17, 2001 San Francisco, CA 94107											
Box Non-Fee Amendment Commissioner of Patents Washington, D.C. 20231		Extension of Term <input type="checkbox"/> Applicant petitions for an extension of time under 37 C.F.R. 1.136											
Papers Enclosed <input checked="" type="checkbox"/> Amendment and Marked Up Copy of Claims/Specification <input type="checkbox"/> 0 Drawings <input type="checkbox"/> Supplemental Information Disclosure Statement <input type="checkbox"/> PTO-1449 Form <input type="checkbox"/> Citations <input type="checkbox"/> Declaration/Affidavit <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Postcard for Return <input type="checkbox"/> _____		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">Extension (Months)</th> <th style="width: 50%;">Extension Fee</th> </tr> <tr> <td><input type="checkbox"/> One Month</td> <td>\$110</td> </tr> <tr> <td><input type="checkbox"/> Two Months</td> <td>\$400</td> </tr> <tr> <td><input type="checkbox"/> Three Months</td> <td>\$920</td> </tr> <tr> <td colspan="2" style="text-align: center;">Total \$ _</td> </tr> </table> <input checked="" type="checkbox"/> Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.		Extension (Months)	Extension Fee	<input type="checkbox"/> One Month	\$110	<input type="checkbox"/> Two Months	\$400	<input type="checkbox"/> Three Months	\$920	Total \$ _	
Extension (Months)	Extension Fee												
<input type="checkbox"/> One Month	\$110												
<input type="checkbox"/> Two Months	\$400												
<input type="checkbox"/> Three Months	\$920												
Total \$ _													
Fees for Extra Claims Amendment Fee Calculation													
	Claims remaining after amendment	Highest Number Previously Paid for	Number Extra	Rate Large Entity	Additional Fee								
Total Claims	42	69	-27	\$18	0								
Independent Claims	4	8	-4	\$84	0								
Multiple Dependent Claims				\$280	0								
Supplemental Information Disclosure Statement				\$180									
Total													
Fee Payment <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Extension Fees</td> <td></td> </tr> <tr> <td>Fees for Extra Claims</td> <td></td> </tr> <tr> <td>Total</td> <td style="text-align: center;">0</td> </tr> </table>		Extension Fees		Fees for Extra Claims		Total	0	Fee Deficiency <input checked="" type="checkbox"/> If any additional extension and/or fee is required, please charge Deposit Account No. <u>10-0258</u> and/or <input checked="" type="checkbox"/> If any additional fee for claims is required, please charge Deposit Account No. <u>10-0258</u>					
Extension Fees													
Fees for Extra Claims													
Total	0												
<input type="checkbox"/> Attached is check no. _____ in the sum of \$0.00. <input type="checkbox"/> Please charge deposit account no. <u>10-0258</u> in the sum of \$0.00. A duplicate of this transmittal is attached.		Please direct all telephone calls to: Ashok K. Janah at (415)538-1555 Please continue to send correspondence to: JANAH & ASSOCIATES, P.C. 650 Delancey Street, Suite 106 San Francisco, CA 94107											
I hereby certify that this correspondence is being deposited with the United State Postal Service with sufficient postage as first class mail in an envelope addressed to: Box Non-Fee Amendment Commissioner of Patents Washington, D.C. 20231 By <u>Stephen Guzzi</u> Date <u>1/17/03</u>		Respectfully Submitted, <u>Ashok K. Janah</u> Date <u>1/17/03</u> Ashok K. Janah Registration No. 37,487											

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